

7-005-005

## RETIREMENT SYSTEM FINANCIAL DISCLOSURE REPORT

Pursuant to LSA-R.S. 42:1114.2, each person who has or is seeking to obtain a contractual or other business or financial relationship with a state or statewide public retirement system shall file with the Board of Ethics a financial disclosure report semiannually if the person has made expenditures of five hundred dollars or more in a calendar year. Reports disclosing expenditures for retirement officials must be filed by August 15<sup>th</sup>, covering January 1 through June 30 of the calendar year and by February 15<sup>th</sup>, covering January 1 - December 31 of the calendar year. Although there is no registration requirement under R.S. 42:1114.2, you may be required to register and report under LSA-R.S. 49:71 et seq.

Reports may be mailed or delivered to: Board of Ethics, 2425 Quail Dr., 3rd Floor, Baton Rouge, LA 70806  
**OR**  
 Faxed to: (225)763-8787 or (225)763-8780

**REPORT COVERING:**

- G** JANUARY 1 through JUNE 30, 2005 - DUE BY AUGUST 15  
**G** JANUARY 1 through DECEMBER 31, \_\_\_\_\_ - DUE BY FEBRUARY 15

FOR OFFICE USE ONLY  
 Postmark Date: \_\_\_\_\_

2050588

1. Name: HarbourVest Partners, LLC  
 Last: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

2. Business Address: One Financial Center, 44th Floor  
 Street and No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Mailing Address: Boston MA 02111

3. Business Phone: (617) 348-3709  
 Area Code and Telephone Number

4. Employer: \_\_\_\_\_

5. Employer's address: \_\_\_\_\_  
 Street and No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

6. Did you make an expenditure exceeding \$50 on one occasion for a retirement system official:

From January 1 through June 30?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
From July 1 through December 31?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	NA <input type="checkbox"/>	

If the answer to either question in Number 6 above is YES, complete Schedule A and attach.

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AUGUST 12, 2005  
FAX 2:31

7. Did you make expenditures exceeding the sum of \$250 for a retirement system official:

From January 1 through June 30?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
From July 1 through December 31?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	NA <input type="checkbox"/>	

If the answer to either question in Number 7 above is YES, complete Schedule A and attach.

§. PROVIDE BELOW (a) the name of the state or statewide public retirement system; (b) the aggregate total of all expenditures attributable to the retirement system made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the retirement system made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the retirement system.

- 1) a. Name of Retirement System: Louisiana State Employees' Retirement System  
b. Total of all expenditures made January 1 through June 30: \$ 16.00 (Lunch meeting)  
c. Total of all expenditures made July 1 through December 31: \$ n/a  
(When applicable)  
d. Total of all expenditures made during the calendar year: \$ 16.00
- 2) a. Name of Retirement System: \_\_\_\_\_  
b. Total of all expenditures made January 1 through June 30: \$ \_\_\_\_\_  
c. Total of all expenditures made July 1 through December 31: \$ \_\_\_\_\_  
(When applicable)  
d. Total of all expenditures made during the calendar year: \$ \_\_\_\_\_
- 3) a. Name of Retirement System: \_\_\_\_\_  
b. Total of all expenditures made January 1 through June 30: \$ \_\_\_\_\_  
c. Total of all expenditures made July 1 through December 31: \$ \_\_\_\_\_  
(When applicable)  
d. Total of all expenditures made during the calendar year: \$ \_\_\_\_\_

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 42:1114.2 has been deliberately omitted.

HarbourVest Partners, LLC  
By: Martha D. Vorlichek

Signature of Filer

MARTHA D. VORLICEK  
MANAGING DIRECTOR

**SCHEDULE A: EXPENDITURES FOR RETIREMENT SYSTEM OFFICIALS**

This schedule must be completed if you answered YES to either question 6 or 7 on the Retirement System Financial Disclosure Report. If, during the period January 1 through June 30 or the period July 1 through December 31, you made either a) an expenditure for any retirement system official exceeding \$50 on any one occasion or b) aggregate expenditures exceeding \$250 for any one retirement system official during a reporting period, then you must provide the aggregate total of expenditures made on that individual in that reporting period. NOTE: Report covering July - December is cumulative. You must include reportable expenditures from the first half of the year in Column #3.

1. OFFICIAL'S NAME	2. NAME OF RETIREMENT SYSTEM	3. AMOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER \$50 ON ONE OCCASION OR MADE EXPENDITURES EXCEEDING \$250 BETWEEN JANUARY 1 AND JUNE 30	4. AMOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER \$50 ON ONE OCCASION OR MADE EXPENDITURES EXCEEDING \$250 BETWEEN JULY 1 AND DECEMBER 31	5. TOTAL OF COLUMNS 3 AND 4